Case 3:08-cv-00408-WQH-BLM U.S. Department of Justice United States Marshals Service

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

PLAINTIFF					Icc	OURT CASE NUMBI	ER	
	ILLIAM J.	DAUGHT	ERY		FILO	8CV 408-1	NQH-BLM	
DEFENDANT				7:0-7-00-		PE OF PROCESS		
				De Puzyzman	- DECCRIPTIO	M 9: 00	O SEIZE OR CONDEMN	
SERVE	DENNR MIT	SON 9 DEPUT	y cps.	D. Cousting	ALSODISAGE N DISTRICT	Ch GORDANA Calledania	O SEIZE OR CONDEMN	
~ \	ADDRESS (Stree	t or KFD, Apartment	No., City, State	e and ZIP Code)	K	1 X K		
AT	FRONT	AND C'S	TREETS	SAMBLEG	O,CA.	_7 8 + VTO /		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: WILLIAM DAUGHTERY						process to be		
						this Form - 285	(ONE)	
F79985 P.O. BOX 2349/D10-1104P					1	parties to be	4(Four)	
BLYTHG, CA, 92226					Served in ti	served in this case		
						Check for service on U.S.A.		
Telephone Numb	ers and Estimated Tir	nes Available For Sei	vice):	*			Alternate Addresses, All	
Fold	(WILLIAM) I	S Enema	RLY OF	FICER WIL	اه سمع	f S. B. Poly	HEE FOR	
DEPuty	oment an	A HAS B	CEAL A	DEPUTY FO	e LESS	THAN 2	YEARS.	
DE PAIC	in the impart	RED OF S	D. POLIC	E DEPARTA	newt -	TEAM & A	TARCOTICS SOL	
A FUR	mer men	Ber C.			_		² <u>m</u>	
							_ ≪	
Signature of Attor	ney or other Originator	requesting service on	behalf of:	⋈ PLAINTIFF	TELEPHON	NE NUMBER-	DATE	
1UN	Many		<u> </u>	☐ DEFENDAN	Γ	<u> </u>	3-17-08	
SPACE BI	ELOW FOR U	JSE OF U.S.	MARSHA	L ONLY — DO	NOT W	RITE BELO	W THIS LINE	
I acknowledge reconumber of process (Sign only first than one USM 28	s indicated. USM 285 if more	tal Process District of Ortain	District to Celve No.	Signature of Author	rized USMS/De	eputyror Clerk	Date 324	
I hereby certify ar	nd return that I have	personally served,	have legal eviden	ice of service, have e	xecuted as show	wn in "Remarks", the	process described	
on the individual;	company, corporation,	etc., at the address sh	lown above or on	the individual, compan	y, corporation,	etc., shown at the add	iress inserted below.	
I hereby certi	ify and return that I a	m unable to locate t	he individual, co	ompany, corporation, c	tc., named abo	ve (See remarks bel	ow)	
Name and title of individual served (if not shown above) A person of suitable age and of cretion then residing in the deferminant place of abode.								
Address (complete	e only if different than	shown above)		-	<u></u>	Date of Service	Time am	
						26 141 06	1150	
							Marshal or Deputy	
						ha-	2	
Service Fee	Total Mileage Charg		Total Charges	Advance Deposits	Amount owed	to U.S. Marshal or	Amount of Refund	
			<u> </u>				•	
REMARKS:	SHERIFF	FFICE AT 1	Lart An	10"C" STAR	CT. 235	te commun	VITY SERVICE	
AFFICE	A AZV. EW	DEVANTA	ENT DIA	LECTORY. N	O DENA	us WILLO.	V HISTED AS	
2	MY SINGA FI	= 11:43,2	6 MARCO	Y 2008				